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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 09/586,747			ing Date 02/2000	☐ To be Mailed		
APPLICATION AS FILED – PART I (Column 1) (Column 2)								SMALL ENTITY				HER THAN		
	FOR	N	NUMBER FILED		NUMBER EXTRA			RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)		
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A			N/A			N/A			
	SEARCH FEE (37 CFR 1.16(k), (i),	or (m))	N/A		N/A			N/A			N/A			
	EXAMINATION FE (37 CFR 1.16(o), (p),		N/A		N/A			N/A			N/A			
	FAL CLAIMS CFR 1.16(i))		minus 20 =		•			x s =		OR	x \$ =			
IND (37	EPENDENT CLAIM CFR 1.16(h))		minus 3 =					x \$ =			x \$ =			
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	If the specification and sheets of paper, the app is \$250 (\$125 for small additional 50 sheets or 35 U.S.C. 41(a)(1)(G) a			pplication size fee due Il entity) for each r fraction thereof. See								
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))														
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL		]	TOTAL			
APPLICATION AS AMENDED – PART II  (Column 1) (Column 2) (Column 3)									SMALL ENTITY OR			OTHER THAN SMALL ENTITY		
AMENDMENT	10/05/2007	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOU PAID FOI	JSLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)		
	Total (37 CFR 1.16(i))	• 14	Minus	** 33				x s =		OR	x \$ =			
	Independent (37 CFR 1,16(h))	٠1	Minus	4				x \$ =		OR	x \$ =			
	Application Size Fee (37 CFR 1.16(s))													
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR				
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE			
(Column 1) (Column 2) (Column 3)														
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)		
	Total (37 CFR 1,16())	*	Minus	**				x s =		OR	x \$ =			
	Independent (37 CFR 1.16(h))	٠	Minus	***		=		x \$ =		OR	x \$ =			
Ш	Application Size Fee (37 CFR 1.16(s))									]				
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))									OR				
Γ										OR	TOTAL ADD'L FEE			
If the entry in column 1 is less than the entry in column 2, write '0' in column 3.  "If the "Highest Number Previously Paid For 'N THIS SPACE is less than 20, enter '20'.  "If the "Highest Number Previously Paid For 'N THIS SPACE is less than 3, enter '3'.  The "Highest Number Previously Paid For '(Total or Independent) is the highest number found in the appropriate box in column 1.														

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